Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
WESTERN DISTRICT OF NEW YORK	=	
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

02/20

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on	Victoria	
	your government-issued picture identification (for example, your driver's	First name	First name
	license or passport).	Middle name	Middle name
	Bring your picture	Harris-Sanders	
	identification to your meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years	FKA Victoria Harris	
	maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-3218	

	About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):
names and tification you have t 8 years ames and as names	■ I have not used any business name or EINs. Business name(s) EIN		☐ I have not used any business name or EINs. Business name(s) EIN
	406 Garfield Street East Rochester, NY 14445		If Debtor 2 lives at a different address:
	Number, Street, City, State & ZIP Code		Number, Street, City, State & ZIP Code
	Monroe		
	County		County
	If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.		If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
	Number, P.O. Box, Street, City, State & ZIP Code		Number, P.O. Box, Street, City, State & ZIP Code
noosing file for	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)		Check one: ☐ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)
	ification you have 8 years mes and as names	I have not used any business name or EINs. Business name(s) Business name(s) EIN 406 Garfield Street East Rochester, NY 14445 Number, Street, City, State & ZIP Code Monroe County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. Number, P.O. Box, Street, City, State & ZIP Code coosing ile for Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason.	I have not used any business name or EINs. Business name(s) EIN 406 Garfield Street East Rochester, NY 14445 Number, Street, City, State & ZIP Code Monroe County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. Number, P.O. Box, Street, City, State & ZIP Code Check one: Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason.

Deb	otor 1 Victoria Harris-Sa	nders				Case number (if known)	
Par	t 2: Tell the Court About	Your Bankrupt	cy Case				
7.	The chapter of the Bankruptcy Code you are			tion of each, see <i>Notic</i>		11 U.S.C. § 342(b) for Individuals Filing for Bankrupto te box.	/
	choosing to file under	Chapter 7					
		☐ Chapter 1					
		☐ Chapter 1					
		☐ Chapter 1					
8.	How you will pay the fee	about h order. It	low you may pay.	Typically, if you are p	aying the fee yo	ck with the clerk's office in your local court for more detourself, you may pay with cash, cashier's check, or monalf, your attorney may pay with a credit card or check	ney
				installments. If you onents (Official Form 10		on, sign and attach the Application for Individuals to Po	Эy
		☐ I reque	st that my fee be	waived (You may re	quest this optio	on only if you are filing for Chapter 7. By law, a judge m	ay,
		applies	to your family size	e and you are unable	to pay the fee in	our income is less than 150% of the official poverty line n installments). If you choose this option, you must fill cial Form 103B) and file it with your petition.	
				no chapter i i iing i c	oranoa (om	sian sim 1885) and me it with your potition.	
9.	Have you filed for	■ No.					
	bankruptcy within the last 8 years?	☐ Yes.					
	•		strict	W	'hen	Case number	
		Di	strict	W	hen	Case number	
		Di	strict	W	hen	Case number	
10.	Are any bankruptcy cases pending or being	■ No					
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.					
		De	ebtor			Relationship to you	
		Di	strict	W	/hen	Case number, if known	
		De	ebtor			Relationship to you	
		Di	strict	W	/hen	Case number, if known	
11.	Do you rent your	□ No. G	So to line 12.				
	residence?		las your landlord	obtained an eviction j	udgment agains	st you?	
		— 163.	No. Go to li				
		[Yes. Fill ou bankruptcy		out an Eviction	Judgment Against You (Form 101A) and file it with this	;

Jeb	tor i Victoria Harris-Sa	naers			Case number (if known)
ar	Report About Any Bu	sinesses	You Owi	n as a Sole Proprieto	or
2.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.	
		☐ Yes.	Name	e and location of busi	ness
	A sole proprietorship is a				
	business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	e of business, if any	
	If you have more than one sole proprietorship, use a		Numl	per, Street, City, State	e & ZIP Code
	separate sheet and attach it to this petition.		Chec	k the appropriate box	k to describe your business:
	,				ess (as defined in 11 U.S.C. § 101(27A))
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))
				Stockbroker (as de	efined in 11 U.S.C. § 101(53A))
					(as defined in 11 U.S.C. § 101(6))
				None of the above	
3.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a <i>small business</i> debtor?	déadlines	s. If you in	ndicate that you are a low statement, and fe	court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of ederal income tax return or if any of these documents do not exist, follow the procedure
	For a definition of small	■ No.	I am	not filing under Chapt	ter 11.
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am Code		1, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.			1, I am a small business debtor according to the definition in the Bankruptcy Code, and dunder Subchapter V of Chapter 11.
		☐ Yes.			1, I am a small business debtor according to the definition in the Bankruptcy Code, and Subchapter V of Chapter 11.
ar	4: Report if You Own or	Have Any	/ Hazard	ous Property or Any	Property That Needs Immediate Attention
4.	Do you own or have any	■ No.			
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is	the hazard?	
	public health or safety? Or do you own any property that needs immediate attention?			diate attention is , why is it needed?	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where i	s the property?	
	-				Number, Street, City, State & Zip Code
_					

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

 ☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Deb	tor 1 Victoria Harris-Sa	nders		Case number	(if known)
Par	t 6: Answer These Quest	ions for Re	eporting Purposes		
16.	What kind of debts do you have?	16a.		nsumer debts? Consumer debts are definant, family, or household purpose."	ned in 11 U.S.C. § 101(8) as "incurred by an
			☐ No. Go to line 16b.		
			Yes. Go to line 17.		
		16b.		siness debts? Business debts are debts t tment or through the operation of the busi	
			☐ No. Go to line 16c.		
			☐ Yes. Go to line 17.		
		16c.	State the type of debts you ow	e that are not consumer debts or business	s debts
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter 7	. Go to line 18.	
	Do you estimate that after any exempt property is excluded and	■ Yes.		o you estimate that after any exempt propellable to distribute to unsecured creditors?	erty is excluded and administrative expenses
	administrative expenses		■ No		
	are paid that funds will be available for distribution to unsecured creditors?		☐ Yes		
18.	How many Creditors do	1 -49		1 ,000-5,000	☐ 25,001-50,000
	you estimate that you owe?	☐ 50-99		□ 5001-10,000	5 0,001-100,000
		☐ 100-19 ☐ 200-99		□ 10,001-25,000	☐ More than100,000
19.	How much do you	□ \$0 - \$5	50,000	□ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion
	estimate your assets to be worth?		01 - \$100,000	☐ \$10,000,001 - \$50 million ☐ \$50,000,001 - \$100 million	☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion
			001 - \$500,000 001 - \$1 million	□ \$100,000,001 - \$100 million	☐ More than \$50 billion
20.	How much do you estimate your liabilities	□ \$0 - \$5	-	□ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion
	to be?		01 - \$100,000 001 - \$500,000	□ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million	□ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion
		_	001 - \$300,000 001 - \$1 million	□ \$100,000,001 - \$500 million	☐ More than \$50 billion
Par	t7: Sign Below				
For	you	I have exa	amined this petition, and I decla	are under penalty of perjury that the inform	nation provided is true and correct.
		If I have of United Sta	chosen to file under Chapter 7, I ates Code. I understand the reli	I am aware that I may proceed, if eligible, ief available under each chapter, and I cho	under Chapter 7, 11,12, or 13 of title 11, oose to proceed under Chapter 7.
				of pay or agree to pay someone who is not notice required by 11 U.S.C. § 342(b).	an attorney to help me fill out this
		I request	relief in accordance with the cha	apter of title 11, United States Code, spec	ified in this petition.
		bankrupto and 3571	cy case can result in fines up to	concealing property, or obtaining money or \$250,000, or imprisonment for up to 20 years.	r property by fraud in connection with a ears, or both. 18 U.S.C. §§ 152, 1341, 1519,
		Victoria	Harris-Sanders Harris-Sanders of Debtor 1	Signature of Debtor	2
		J			
		Executed	on February 27, 2020 MM / DD / YYYY	Executed on MM	/ DD / YYYY
			1V11V1 / DD / 1 1 1 1	IVIIVI	, 55, 1111

Debtor 1	Victoria Harris-Sanders	Case number (if known)	

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

, 2020 YY
ahoo.com
_

Fill	in this inform	nation to identify your	case:				
	tor 1	Victoria Harris-Sa					
200		First Name	Middle Name	Last Name			
	tor 2 use if, filing)	First Name	Middle Name	Last Name			
Unit	ed States Bar	nkruptcy Court for the:	WESTERN DISTRICT (OF NEW YORK			
		mapley Countries and					
Cas (if kn	e number						if this is an led filing
	,						
∩fi	icial For	rm 106Sum					
			and Liabilities ar	nd Certain Statistica	I Information	1	2/15
Be a nfor our	s complete a mation. Fill o original forn	nd accurate as possib out all of your schedul ns, you must fill out a	ole. If two married people es first; then complete the	are filing together, both are entering together, both are entering to the entering together are the top of this page.	equally responsible for		
Part	Summa	arize Your Assets					
						Your as Value of	ssets f what you own
1.	Schedule A. 1a. Copy line	/B: Property (Official F e 55, Total real estate, f	orm 106A/B) rom Schedule A/B			\$	60,500.00
						\$	20,719.21
	1c. Copy line	e 63, Total of all propert	y on Schedule A/B			\$	81,219.21
Part	2: Summa	arize Your Liabilities					
						Your lia	hilitiaa
							you owe
2.			laims Secured by Property mn A, Amount of claim, at	(Official Form 106D) the bottom of the last page of P	art 1 of Schedule D	\$	123,256.00
3.			Unsecured Claims (Officia 1 (priority unsecured claim	l Form 106E/F) s) from line 6e of <i>Schedule E/F</i>	Ę	\$	0.00
	3b. Copy the	e total claims from Part	2 (nonpriority unsecured c	laims) from line 6j of Schedule I	E/F	\$	41,368.61
					Your total liabilities	\$	164,624.61
Part	3: Summa	arize Your Income and	Expenses				
4.		Your Income (Official Football Fo		<i>I</i>		\$	3,039.21
5.		Your Expenses (Official nonthly expenses from I				\$	4,541.49
Part	4: Answe	r These Questions for	Administrative and Stati	stical Records			
6.	•	•	er Chapters 7, 11, or 13? on this part of the form. C	heck this box and submit this fo	rm to the court with yo	ur other sch	edules.
7.	■ Yes What kind o	of debt do you have?					
				debts are those "incurred by an g for statistical purposes. 28 U.		a personal,	family, or
	☐ Your de		consumer debts. You have	ve nothing to report on this part	· ·	box and su	ubmit this form to

Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

4,856.32

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

Debtor 1	Victoria Hari	ris-Sanders					
	First Name		e Name	Last Name			
Debtor 2 Spouse, if filing)	First Name	Middle	e Name	Last Name			
nited States	Bankruptcy Court for	the: WESTERN	DISTR	ICT OF NEW YORK			
ase number							Check if this is a amended filing
νεα: -: - I -	400 A /D						
	orm 106A/B	_					
<u>ichedu</u>	<u>ıle A/B: Pı</u>	roperty					12/15
□ No. Go to F	Part 2.	unable interest in a	arry resid	ence, building, land, or similar property?			
Yes. When	re is the property?						
.1			What	is the property? Check all that apply			
1 _ 308 Pen	mberton Road ess, if available, or other des	cription	What	Single-family home			ns or exemptions. Put
1 308 Pen	mberton Road	cription	What ■ □		the amount of an	ny secured o	ns or exemptions. Put claims on Schedule D: Secured by Property.
1 308 Pen	mberton Road	cription	■	Single-family home Duplex or multi-unit building	the amount of an Creditors Who H	ny secured o lave Claims	claims on Schedule D: Secured by Property.
308 Pen Street addre	mberton Road ess, if available, or other des	14622-0000	■	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land	the amount of an Creditors Who H Current value of entire property?	ny secured of lave Claims	claims on Schedule D: Secured by Property. Current value of the portion you own?
308 Pen Street addre	mberton Road ess, if available, or other des			Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property	the amount of an Creditors Who H Current value of entire property? \$121,00	f the	Current value of the portion you own? \$60,500.00
308 Pen Street addre	mberton Road ess, if available, or other des	14622-0000		Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land	Current value of entire property? \$121,00	f the 200.00	Current value of the portion you own? \$60,500.0
308 Pen Street addre	mberton Road ess, if available, or other des	14622-0000		Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare	Current value of entire property? \$121,00 Describe the na (such as fee sin a life estate), if I	f the 200.00	Current value of the portion you own? \$60,500.0 Ir ownership interest cy by the entireties, o
308 Pen Street addre	mberton Road ess, if available, or other des	14622-0000		Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one	Current value of entire property? \$121,00 Describe the na (such as fee sin a life estate), if I	f the 200.00	Current value of the portion you own? \$60,500.0 Ir ownership interest cy by the entireties, of the company owned (jointly owned)
308 Pen Street addre	mberton Road ess, if available, or other des	14622-0000		Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other	Current value of entire property? \$121,00 Describe the na (such as fee sim a life estate), if I	f the 200.00	Current value of the portion you own? \$60,500.0 Ir ownership interest cy by the entireties, of the company owned (jointly owned)
308 Pen Street addre	mberton Road ess, if available, or other des	14622-0000		Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one	Current value of entire property? \$121,00 Describe the na (such as fee sin a life estate), if I Fee simple a with estrang	f the control of the	Current value of the portion you own? \$60,500.00 Ir ownership interest cy by the entireties, o (jointly owned and)
308 Pen Street addre	mberton Road ess, if available, or other des	14622-0000	Who	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only Debtor 2 only	Current value of entire property? \$121,00 Describe the na (such as fee sin a life estate), if I Fee simple a with estrang	f the control of the control of the control of you nple, tenan known. absolute ged husb	Current value of the portion you own? \$60,500.00 Ir ownership interest cy by the entireties, o
308 Pen Street addre	mberton Road ess, if available, or other des	14622-0000		Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Current value of entire property? \$121,00 Describe the na (such as fee sin a life estate), if I Fee simple a with estrang	f the control of the control of the control of you nple, tenan known. absolute ged husb	Current value of the portion you own? \$60,500.00 Ir ownership interest cy by the entireties, o (jointly owned and)
308 Pen Street addre	mberton Road ess, if available, or other des	14622-0000	Who Other	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another information you wish to add about this ite	current value of entire property? \$121,00 Describe the na (such as fee sin a life estate), if I Fee simple a with estrang Check if thi (see instruction, such as local	f the course of the course of the course of you there of you have absolute ged husb	Current value of the portion you own? \$60,500.0 If ownership interest cy by the entireties, company owned and)

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Part 2: Describe Your Vehicles

Official Form 106A/B Schedule A/B: Property page 1

Debto				Case number (if known)	
3. Car	s, vans, trucks, tracto	rs, sport utility ve	hicles, motorcycles		
Y	'es				
3.1	Make: Toyota		Who has an interest in the property? Check one		ured claims or exemptions. Put
	Model: RAV 4		■ Debtor 1 only		secured claims on Schedule D: ve Claims Secured by Property.
	Year: 2015		Debtor 2 only	Current value of	
	Approximate mileage: Other information:	100,000	Debtor 1 and Debtor 2 only	entire property?	portion you own?
Γ	Good condition (lie	n). Kbb.com	At least one of the debtors and another		
	private party value 2/25/2020.	,	☐ Check if this is community property (see instructions)	\$11,602	2.00 \$11,602.00
■ N	res	no portion you ow	n for all of your ontrine from Part 2, including	a any entries for	
			n for all of your entries from Part 2, including that number here		\$11,602.00
	.				-
	Describe Your Persona		ems terest in any of the following items?		Current value of the
·		·	torest in any or the renowing items.		portion you own? Do not deduct secured claims or exemptions.
Exa	usehold goods and fur amples: Major appliance No Yes. Describe		, china, kitchenware		
	1		ds, furniture, furnishings, electronics, je ersonal property as set forth and descr Schedule A/B		\$1,155.00
Exa	including cell p		eo, stereo, and digital equipment; computers, pri nedia players, games	inters, scanners; music c	ollections; electronic devices
		See Attachment	#1 - Schedule A/B \$ values included in	above	\$0.00
				·	
	other collection	gurines; paintings, s, memorabilia, col	prints, or other artwork; books, pictures, or other llectibles	r art objects; stamp, coin,	or baseball card collections;
_	Yes. Describe				
	musical instrun	aphic, exercise, an	nd other hobby equipment; bicycles, pool tables,	golf clubs, skis; canoes	and kayaks; carpentry tools;
	Yes. Describe				

De	btor 1 Victoria H	arris-Sanders	Case number	(if known)
		See Attachment #1 - Scheo	dule A/B \$ values included in above	\$0.00
	Firearms Examples: Pistols, ri No Yes. Describe	fles, shotguns, ammunition, and relat	red equipment	
	Clothes Examples: Everyday □ No ■ Yes. Describe	clothes, furs, leather coats, designed	r wear, shoes, accessories	
		Debtor's clothing and pers	onal effects	\$200.00
!	Jewelry Examples: Everyday □ No ■ Yes. Describe	r jewelry, costume jewelry, engageme	ent rings, wedding rings, heirloom jewelry, watche	s, gems, gold, silver
		See Attachment #1 - Scheo	lule A/B \$ values included in above	\$0.00
 	Non-farm animals Examples: Dogs, cat No Yes. Describe Any other personal No Yes. Give specific	and household items you did not a	already list, including any health aids you did i	not list
15.		ue of all of your entries from Part 3 at number here	, including any entries for pages you have atta	st,355.00 \$1,355.00
Par	rt 4: Describe Your Fin	nancial Assets		
Do	you own or have an	y legal or equitable interest in any	of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
-	■ No	ou have in your wallet, in your home,	in a safe deposit box, and on hand when you file	your petition
	institution	, savings, or other financial accounts ns. If you have multiple accounts with	; certificates of deposit; shares in credit unions, b the same institution, list each.	rokerage houses, and other similar
	□ No ■ Yes		Institution name:	
		17.1. Checking account	Canandaigua National Bank	\$300.00
	Examples: Bond fund	s, or publicly traded stocks ds, investment accounts with brokera	ige firms, money market accounts	
	■ No □ Yes	Institution or issuer name	e:	

Official Form 106A/B Schedule A/B: Property page 3

De	ebtor 1	Victoria Harris	-Sanders	Case number (if known)	
	joint v	ublicly traded stoo enture	k and interests in incorporat	ed and unincorporated businesses, including an interest	in an LLC, partnership, and
	■ No □ Yes.	Give specific inform	mation about them Name of entity:	% of ownership:	
	Negoti	<i>iable instrument</i> s in	clude personal checks, cashier	ole and non-negotiable instruments 's' checks, promissory notes, and money orders. er to someone by signing or delivering them.	
		Give specific inform	nation about them Issuer name:		
		ment or pension acoles: Interests in IRA		b), thrift savings accounts, or other pension or profit-sharing p	olans
	☐ Yes.	List each account s	separately. Type of account:	Institution name:	
	Your s Examp		deposits you have made so tha	nt you may continue service or use from a company lic utilities (electric, gas, water), telecommunications compani	es, or others
	□ No ■ Yes.			Institution name or individual:	
			Security deposit with landlord	Security deposit with landlord	\$875.00
23.	Annuit	ies (A contract for a	a periodic payment of money to	you, either for life or for a number of years)	
	■ No □ Yes	lssu	er name and description.		
24.			IRA, in an account in a quality 9A(b), and 529(b)(1).	fied ABLE program, or under a qualified state tuition pro	gram.
	☐ Yes	Insti	tution name and description. Se	eparately file the records of any interests.11 U.S.C. § 521(c):	
	■ No	•		r than anything listed in line 1), and rights or powers exer	cisable for your benefit
			mation about them		
			lemarks, trade secrets, and o in names, websites, proceeds f	ther intellectual property rom royalties and licensing agreements	
	☐ Yes.	Give specific inform	mation about them		
27.	Examp		d other general intangibles ts, exclusive licenses, coopera	tive association holdings, liquor licenses, professional license	es
	■ No □ Yes.	Give specific inform	mation about them		
Mo	oney or	property owed to	you?		Current value of the portion you own? Do not deduct secured claims or exemptions.

Debto	or 1 Victoria Harris-Sanders	C	ase number (if known)	
	ax refunds owed to you No			
	Yes. Give specific information abou	t them, including whether you already filed the returns an	d the tax years	
		Debtor's anticipated interest in 2019 Federal and NYS Income Tax refunds plus 2020 Federal and NYS Income Tax refunds prorated to 2/27/2020, based upon total 2018 income tax refunds of \$5,684.00.	Federal and New York State Combined	\$6,587.21
E	amily support Examples: Past due or lump sum alir No Yes. Give specific information	nony, spousal support, child support, maintenance, divord	ce settlement, property se	ttlement
E	ther amounts someone owes you Examples: Unpaid wages, disability in benefits; unpaid loans you No Yes. Give specific information	nsurance payments, disability benefits, sick pay, vacation	pay, workers' compensa	tion, Social Security
E	No Yes. Name the insurance company	surance; health savings account (HSA); credit, homeown of each policy and list its value. by name: Beneficiar		Surrender or refund value:
lf s∈	ny interest in property that is due if you are the beneficiary of a living tromeone has died. No Yes. Give specific information	you from someone who has died ust, expect proceeds from a life insurance policy, or are o	currently entitled to receive	
E		er or not you have filed a lawsuit or made a demand f sputes, insurance claims, or rights to sue	or payment	
	ther contingent and unliquidated No Yes. Describe each claim	claims of every nature, including counterclaims of the	e debtor and rights to se	et off claims
	ny financial assets you did not alr No Yes. Give specific information	eady list		
	-	entries from Part 4, including any entries for pages y		\$7,762.21
Part 5	Describe Any Business-Related Pro	perty You Own or Have an Interest In. List any real estate in	Part 1.	
		le interest in any business-related property?		
	No. Go to Part 6.			

Debt	or 1 Victoria Harris-Sanders		Case number (if known)	
Part	Describe Any Farm- and Commercial Fishing-Related Property You If you own or have an interest in farmland, list it in Part 1.	Own or Have an Interes	st In.	
46. C	o you own or have any legal or equitable interest in any farm-	or commercial fishin	ng-related property?	
	No. Go to Part 7.		J	
	☐ Yes. Go to line 47.			
Part	7: Describe All Property You Own or Have an Interest in That You	u Did Not List Above		
	Do you have other property of any kind you did not already list Examples: Season tickets, country club membership No I Yes. Give specific information	?		
54.	Add the dollar value of all of your entries from Part 7. Write the	at number here		\$0.00
55.	Part 1: Total real estate, line 2			\$60,500.00
56.	Part 2: Total vehicles, line 5	\$11,602.00		
57.	Part 3: Total personal and household items, line 15	\$1,355.00		
58.	Part 4: Total financial assets, line 36	\$7,762.21		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54 +	\$0.00		
62.	Total personal property. Add lines 56 through 61	\$20,719.21	Copy personal property tota	\$20,719.21
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$81,219.21

In Re: Victoria Harris-Sanders Attachment #1 - Schedule A/B Case No.:

ITEM:	AGE:	GARAGE SALE VALUE:	
MY BEDROOM: QUEEN SIZE BED W/FRAME	1 1/2 YRS.	\$150.00	
PLASTIC DRESSERS	1 1/2 YRS.	\$25.00	
MED SIZE TELEVISION	1 1/2 YRS.	\$50.00	
SON'S BEDROOM: CRIB	4 YRS.	\$50.00	
2 DRESSERS	4 YRS.	\$100.00	
TOYS/TOY BOX/BOOKS	1 12 YRS	\$50.00	
SON'S BEDROOM: FUTON BED	6 YRS FROM GRANDMOTHERS HOUSE	\$50.00	
PLASTIC DRESSER	1 1/2 YRS.	\$25.00	
KITCHEN: TABLE AND CHAIRS	1 1/2 YRS.	\$100.00	
POTS/PANS/PLASTIC WARE	1 1/2 YRS.	\$30.00	
SILVERWARE	1 1/2 YRS.	\$10.00	
LIVING ROOM: COUCH	1 1/2 YRS.	\$150.00	
TELEVISION	1 1/2 YRS.	\$50.00	
TV STAND	1 1/2 YRS.	\$30.00	
MISCELLANEOUS: PICTURES	20 YRS.	\$25.00	
CURTAINS/TOWELS/LINEN	1 1/2 YRS.	\$30.00	
STROLLER	4YRS.	\$20.00	

CAR SEAT	1 1/2 YRS.	\$20.00
CELL PHONE	2 YRS.	\$100.00
JEWELRY:		
NECKLACE		\$50.00
EARRINGS		\$40.00
Total		\$1,155.00

Fill in this infor	mation to identify your	case:		
Debtor 1	Victoria Harris-Sa	anders		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	WESTERN DISTRICT C	DF NEW YORK	
Case number				
(if known)				☐ Check if this is an
				amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:	Identify the Property You Claim as Exempt

1.	Which set of exemptions are you claiming	? Check one only, eve	n if yo	our spouse is filing with you.				
	☐ You are claiming state and federal nonban	kruptcy exemptions.	11 U.S	S.C. § 522(b)(3)				
	■ You are claiming federal exemptions. 11	U.S.C. § 522(b)(2)						
2.	For any property you list on Schedule A/B that you claim as exempt, fill in the information below.							
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption			
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.				
	2015 Toyota RAV 4 100,000 miles	\$11,602.00		\$1.00	11 U.S.C. § 522(d)(2)			
	Good condition (lien). Kbb.com private party value as of 2/25/2020. Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit				
	Household goods, furniture,	\$1,155.00		\$1,155.00	11 U.S.C. § 522(d)(3)			
	furnishings, electronics, jewelry and other items of personal property as set forth and described on Attachment #1 - Schedule A/B Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit				
	Debtor's clothing and personal effects	\$200.00		\$200.00	11 U.S.C. § 522(d)(3)			
	Line from Schedule A/B: 11.1			100% of fair market value, up to any applicable statutory limit				
	Checking account: Canandaigua National Bank	\$300.00		\$300.00	11 U.S.C. § 522(d)(5)			
	Line from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit				
	Security deposit with landlord: Security deposit with landlord	\$875.00		\$875.00	11 U.S.C. § 522(d)(5)			
	Line from Schedule A/B: 22.1			100% of fair market value, up to any applicable statutory limit				

De	ebtor 1 Victoria Harris-Sanders			Case number (if known)				
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	unt of the exemption you claim	Specific laws that allow exemption			
		Copy the value from Schedule A/B	Chec	k only one box for each exemption.				
	Federal and New York State Combined: Debtor's anticipated	\$6,587.21	\$6,587.21		11 U.S.C. § 522(d)(5)			
	interest in 2019 Federal and NYS Income Tax refunds plus 2020 Federal and NYS Income Tax refunds prorated to 2/27/2020, based upon total 2018 income tax refunds of \$5,684.00. Line from Schedule A/B: 28.1			100% of fair market value, up to any applicable statutory limit				
3.	Are you claiming a homestead exemption of (Subject to adjustment on 4/01/22 and every 3 ■ No			ed on or after the date of adjustmer	nt.)			
☐ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?☐ No					?			

☐ Yes

Fill in this information to identify	your case:				
Debtor 1 Victoria Harr	is-Sanders				
First Name	Middle Name La	ast Name		•	
Debtor 2 (Spouse if, filling) First Name	Middle Name La	ast Name			
United States Bankruptcy Court for	the: WESTERN DISTRICT OF NEW YO	ORK			
Case number				_	if this is an ded filing
Official Form 106D Schedule D: Credito	ors Who Have Claims Se	ecure	d by Propert	у	12/15
	ole. If two married people are filing together, but it out, number the entries, and attach it to the				
1. Do any creditors have claims secure	ed by your property?				
☐ No. Check this box and subr	nit this form to the court with your other sch	nedules. Y	ou have nothing else t	o report on this form.	
Yes. Fill in all of the informat	·		J		
Part 1: List All Secured Claims	i		Column A	Column B	Column C
for each claim. If more than one creditor	has more than one secured claim, list the creditor has a particular claim, list the other creditors in Fabetical order according to the creditor's name.		Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion
2.1 Canandaigua National					•
Bank	Describe the property that secures the o	claim:	\$12,256.00	\$11,602.00	\$654.00
72 South Main Street Canandaigua, NY 14424	2015 Toyota RAV 4 100,000 mile Good condition (lien). Kbb.con private party value as of 2/25/20 As of the date you file, the claim is: Checapply. ☐ Contingent	m 020.			
Number, Street, City, State & Zip Code	☐ Unliquidated☐ Disputed				
Who owes the debt? Check one.	Nature of lien. Check all that apply.				
■ Debtor 1 only □ Debtor 2 only	☐ An agreement you made (such as mort car loan)	tgage or sec	cured		
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechan	nic's lien)			
lacksquare At least one of the debtors and anoth	er				
☐ Check if this claim relates to a community debt	Other (including a right to offset)	ırchase I	Money Security Int	erest	

Date debt was incurred 8/2018

Last 4 digits of account number

Debtor 1 Victoria Harris-Sanders				Case number (if known)			
	First Name	Middle Name	Last Name	_			
2.2 Cit	izens Bank, N.A.	Describe	the property that secures	the claim:	\$111,000.00	\$121,000.00	\$0.00
Cred	litor's Name	308 Per	nberton Road Roch	ester, NY			
		14622	Monroe County				
		Single	amily residence on	.19 acres			
		lot loca	ted at 308 Pemberto	n Road,			
			f Irondequoit, New `				
P.0	D. Box 6260	As of the apply.	date you file, the claim is	Check all that			
	en Allen, VA 23058	арріу. □ Contin	gent				
Num	ber, Street, City, State & Zip Co						
	.50., 0.100., 0.19, 0.11.0 a 2.p 0.	Disput					
Who owe	es the debt? Check one.		f lien. Check all that apply.				
☐ Debtor	1 only	☐ An agi	eement you made (such as	mortgage or s	ecured		
☐ Debtor	2 only	car lo	an)				
☐ Debtor	1 and Debtor 2 only	☐ Statute	ory lien (such as tax lien, me	echanic's lien)			
At leas	st one of the debtors and ar	nother	ent lien from a lawsuit				
	if this claim relates to a nunity debt	■ Other	(including a right to offset)	Purchase	Money Mortgage		
Date debt	was incurred 6/3/201	6 La	st 4 digits of account nun	nber			
A al al 41a a	dellar value of value ante	iaa in Calumn A a	this was Muita that were		¢422.25	c 00	
	•		n this page. Write that nur ralue totals from all pages		\$123,25		
	at number here:	in, add the dollar v	alue totais iroin ali pages	•	\$123,25	6.00	

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Best Case Bankruptcy

Fill in this in	formation to identify your	case:				
Debtor 1	Victoria Harris-Sa	inders				
	First Name	Middle Name	Last Name			
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name			
	Bankruptcy Court for the:	WESTERN DISTRICT (OF NEW YORK			
_						
Case number (if known)	·					Check if this is an
(mended filing
					_	J
Official Fo	orm 106E/F					
3chedule	E/F: Creditors W	ho Have Unsecu	red Claims			12/15
name and case	Continuation Page to this page number (if known). St All of Your PRIORITY Un	•	n to report in a Part,	do not file that Part. On the	e top of any addi	tional pages, write your
1. Do any cre	editors have priority unsecure	d claims against you?				
■ No. Go	to Part 2.					
☐ Yes.						
Part 2: Lis	st All of Your NONPRIORIT	V Unsecured Claims				
	editors have nonpriority unsec					
☐ No. You	u have nothing to report in this p	art. Submit this form to the co	urt with your other sch	nedules.		
Yes.						
unsecured	your nonpriority unsecured cl claim, list the creditor separately reditor holds a particular claim, l	y for each claim. For each clai	m listed, identify what	type of claim it is. Do not list	claims already inc	cluded in Part 1. If more
Fall 2.						Total claim
	Vanheukelum, M.D.	Last 4 digits	of account number			\$1,131.00
999	East Ridge Road, Suite hester, NY 14621	#800 When was t	he debt incurred?	2019		-
	er Street City State Zip Code	As of the da	te you file, the claim	is: Check all that apply		
_	incurred the debt? Check one.					
■ De	ebtor 1 only	☐ Continge	nt			
☐ De	ebtor 2 only	☐ Unliquida	ted			
☐ De	ebtor 1 and Debtor 2 only	☐ Disputed				
☐ At	least one of the debtors and and	ourci	NPRIORITY unsecure	ed claim:		
	neck if this claim is for a com					
debt Is the	claim subject to offset?	☐ Obligatio report as prid		aration agreement or divorce	that you did not	
■ No	•		•	ng plans, and other similar de	hta	
NIC			pension of profit-sharf	ng pians, and other similar de	BUS	

or 1 Victoria Harris-Sanders	Case number (if known)					
Citizens Bank, N.A.	Last 4 digits of account number	\$7,253.00				
Nonpriority Creditor's Name 10561 Telegraph Road Glen Allen, VA 23059	When was the debt incurred? <u>07/2016-8/2017</u>					
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply					
Debtor 1 only	☐ Contingent					
Debtor 2 only	☐ Unliquidated					
Debtor 1 and Debtor 2 only	☐ Disputed					
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
☐ Check if this claim is for a community	☐ Student loans					
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
■ No	\square Debts to pension or profit-sharing plans, and other similar debts					
Yes	■ Other. Specify Miscellaneous credit card purchases					
ESL Federal Credit Union	Last 4 digits of account number	\$3,041.00				
Nonpriority Creditor's Name 225 Chestnut Street Rochester, NY 14604	When was the debt incurred? 09/2013-8/2017					
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply					
Debtor 1 only	☐ Contingent					
Debtor 2 only	☐ Unliquidated					
☐ Debtor 1 and Debtor 2 only	☐ Disputed					
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
☐ Check if this claim is for a community	☐ Student loans					
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
■ No	\square Debts to pension or profit-sharing plans, and other similar debts					
Yes	■ Other. Specify Miscellaneous credit card purchases					
Highland Hospital Nonpriority Creditor's Name	Last 4 digits of account number	\$4,392.11				
1000 South Avenue Rochester, NY 14620	When was the debt incurred? 2018					
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply					
Debtor 1 only	☐ Contingent					
Debtor 2 only	☐ Unliquidated					
Debtor 1 and Debtor 2 only	Disputed					
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
☐ Check if this claim is for a community	☐ Student loans					
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
■ No	\square Debts to pension or profit-sharing plans, and other similar debts					
Yes	■ Other. Specify Medical services					

Debt	or 1 Victoria Harris-Sanders	Case number (if known)	
4.5	LVNV Funding, LLC Nonpriority Creditor's Name	Last 4 digits of account number	\$1,156.00
	P.O. Box 1269 Greenville, SC 29603	When was the debt incurred? 9/2013-4/2018	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Assignee of Comenity Bank (miscellaneous store card purchases - Kay Jewelers.	
4.6	LVNV Funding, LLC Nonpriority Creditor's Name	Last 4 digits of account number	\$2,208.00
	P.O. Box 1269 Greenville, SC 29603	When was the debt incurred? 9/2018-12/2018	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	□Yes	■ Other. Specify Miscellaneous credit card purchases.	
4.7	Macy's	Last 4 digits of account number	\$348.00
	Nonpriority Creditor's Name P.O. Box 8218 Monroe, OH 45050	When was the debt incurred? 12/2010-10/2018	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Miscellaneous store card purchases - Other. Specify Macy's Department Store	

Debtor	1 Victoria Harris-Sanders	Case number (if known)					
4.8	Midland Credit Management, Inc. Nonpriority Creditor's Name	Last 4 digits of account number	\$3,353.00				
	320 East Big Beaver Road, Suite #300	When was the debt incurred? 3/2010-12/2017					
	Troy, MI 48083 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply					
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	☐ Check if this claim is for a community debt	☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not					
	Is the claim subject to offset?	report as priority claims					
	No	Debts to pension or profit-sharing plans, and other similar debts					
	□Yes	Assignee of Comenity Bank (Miscellaneous store card purchases - Victoria's Secret).					
4.9	Midland Credit Management, Inc. Nonpriority Creditor's Name	Last 4 digits of account number	\$1,709.00				
	320 East Big Beaver Road, Suite #300	When was the debt incurred? 3/2017-10/2018					
	Troy, MI 48083 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply					
	■ Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not					
	Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharing plans, and other similar debts					
	■ No						
	Yes	Assignee of Synchrony Bank, Lowe's Home Store purchases					
4.1 0	Park Ridge Hospital	Last 4 digits of account number	\$1,000.00				
	Nonpriority Creditor's Name 1555 Long Pond Road Rochester, NY 14626	When was the debt incurred? 2018					
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply					
	Who incurred the debt? Check one.						
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	Unliquidated					
	☐ Debtor 1 and Debtor 2 only	Disputed					
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	No	□ Debts to pension or profit-sharing plans, and other similar debts					
	☐ Yes	Other. Specify Medical services					

Victoria Harris-Sanders		
Paul Howe, M.D.	Last 4 digits of account number	\$3,930.5
Nonpriority Creditor's Name 999 East Ridge Road, Suite #800 Rochester, NY 14621	When was the debt incurred? 2019	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	Пол	
_	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	Student loans	
☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	■ Other. Specify Medical services	
Petta Davidson		\$5,000.0
Nonpriority Creditor's Name	Last 4 digits of account number	φ5,000.0
125 Orland Road Rochester, NY 14622	When was the debt incurred? 4/2015	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other. Specify Personal loan	
RBS Citizens, N.A.	Last 4 digits of account number	\$4,547.0
Nonpriority Creditor's Name 1000 Lafayette Boulevard	When was the debt incurred? 12/2017-1/2018	
Bridgeport, CT 06604 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Miscellaneous credit card purchases	

Debtor	1 Victoria Harris-Sanders		Case no	umber (if known)				
4.1	Rochester Gas & Electric Corporation	Last 4 digits of account number	er			\$1,300.00		
	Nonpriority Creditor's Name 89 East Avenue	When was the debt incurred?	When was the debt incurred? 2018					
	Rochester, NY 14649 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	m is: Check	all that apply				
	■ Debtor 1 only	☐ Contingent						
	Debtor 2 only	☐ Unliquidated						
	Debtor 1 and Debtor 2 only	☐ Disputed						
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecu	red claim:					
	☐ Check if this claim is for a community	☐ Student loans						
	debt Is the claim subject to offset?	☐ Obligations arising out of a sereport as priority claims	paration ag	reement or divorce	e that you did not			
	■ No	Debts to pension or profit-sha	aring plans,	and other similar d	ebts			
	☐ Yes	■ Other Specify Gas & ele	ctric ser	vices				
4.1	Strong Memorial Hospital	Local Admits of account number				\$1,000.00		
5	Nonpriority Creditor's Name	Last 4 digits of account number				Ψ1,000.00		
	601 Elmwood Avenue Rochester, NY 14642	When was the debt incurred?	2019					
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	m is: Check	all that apply				
	■ Debtor 1 only	☐ Contingent						
	☐ Debtor 2 only	☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only	☐ Disputed						
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecu	red claim:					
	☐ Check if this claim is for a community	☐ Student loans						
	debt Is the claim subject to offset?	☐ Obligations arising out of a sereport as priority claims	paration ag	reement or divorce	that you did not			
	■ No	Debts to pension or profit-sha	iring plans,	and other similar d	ebts			
	☐ Yes	Other. Specify Medical s	ervices					
Part 3:	List Others to Be Notified About a D	ebt That You Already Listed						
is tryii have i	is page only if you have others to be notified ng to collect from you for a debt you owe to s more than one creditor for any of the debts the d for any debts in Parts 1 or 2, do not fill out	someone else, list the original creditor at you listed in Parts 1 or 2, list the ac	r in Parts 1	or 2, then list the	collection agency here.	Similarly, if you		
	nd Address	On which entry in Part 1 or Part 2 did y		•				
	Protection Association, L.P. Noel Road, Suite #2100	Line 4.14 of (Check one):	_		rity Unsecured Claims			
	5, TX 75240		Part 2:	Creditors with Non	priority Unsecured Claims			
	•	Last 4 digits of account number						
Name a	nd Address	On which entry in Part 1 or Part 2 did y	ou list the o	riginal creditor?				
	non & Solomon, P.C.	Line 4.14 of (<i>Check one</i>):	☐ Part 1:	Creditors with Prior	rity Unsecured Claims			
	ımbia Circle y, NY 12203		Part 2:	Creditors with Non	priority Unsecured Claims			
Albali	y, N1 12203	Last 4 digits of account number						
Part 4:	Add the Amounts for Each Type of U	Insecured Claim						
	the amounts of certain types of unsecured cl	aims. This information is for statistica	I reporting	purposes only. 2	.8 U.S.C. §159. Add the a	mounts for each		
				Tota	l Claim			
	6a. Domestic support obligation	ns	6a.	\$	0.00			
Total claims								
from Pa		<u> </u>	6b.	\$	0.00			
	6c. Claims for death or persona	l injury while you were intoxicated	6c.	\$	0.00			

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Page 6 of 7

ictoria H	larris-Sanders	Case no	umber (if known)	
6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
6f.	Student loans	6f.	Total Cla	0.00
6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 	0.00 41,368.61
'i	6d. 6e. 6f. 6g. 6h.	 6e. Total Priority. Add lines 6a through 6d. 6f. Student loans 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other similar debts 6i. Other. Add all other nonpriority unsecured claims. Write that amount 	6d. Other. Add all other priority unsecured claims. Write that amount here. 6d. 6e. Total Priority. Add lines 6a through 6d. 6e. 6f. Student loans 6f. 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other similar debts 6h. 6i. Other. Add all other nonpriority unsecured claims. Write that amount 6i.	6d. Other. Add all other priority unsecured claims. Write that amount here. 6d. \$ 6e. Total Priority. Add lines 6a through 6d. 6f. Student loans 6f. \$ Cobligations arising out of a separation agreement or divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other similar debts 6i. Other. Add all other nonpriority unsecured claims. Write that amount 6i.

6j. Total Nonpriority. Add lines 6f through 6i.

Fill in this inform					
Debtor 1	Victoria Harris-Sa	anders			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	inkruptcy Court for the:	WESTERN DISTRICT O	OF NEW YORK		
Case number					☐ Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease
Name, Number, Street, City, State and ZIP Code

2.1 Timothy Artessa
35 Kathy Drive
Pittsford, NY 14534

State what the contract or lease is for
Debtor's one-year residential lease for her 1/2 house located at 406 Garfield Street, East Rochester, NY 14445

Fill in this info	ormation to identify your	case:			
Debtor 1	Victoria Harris-Sa				
Dahtar 0	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States B	Bankruptcy Court for the:	WESTERN DISTRICT (OF NEW YORK		
Case number (if known)					☐ Check if this is an amended filing
	orm 106H <mark>e H: Your Cod</mark>	ebtors			12/15
people are filin fill it out, and n your name and	g together, both are equ	ally responsible for supp boxes on the left. Attack . Answer every question	olying correct information the Additional Page to t	n. If more space is ne this page. On the top	te as possible. If two married reded, copy the Additional Page, of any Additional Pages, write
□ No ■ Yes					
	he last 8 years, have you alifornia, Idaho, Louisiana,				states and territories include
■ No. Go	to line 3.				
☐ Yes. Did	d your spouse, former spou	use, or legal equivalent live	e with you at the time?		
in line 2 a	gain as a codebtor only i D), Schedule E/F (Official	f that person is a guaran	tor or cosigner. Make su	re you have listed the	with you. List the person shown e creditor on Schedule D (Officia chedule E/F, or Schedule G to fi
	mn 1: Your codebtor , Number, Street, City, State and Zl	P Code		Column 2: The cred Check all schedules	ditor to whom you owe the debt that apply:
308	ner J. Sanders, Jr. Pemberton Road hester, NY 14622			■ Schedule D, lin □ Schedule E/F, □ Schedule G Citizens Bank, N	e <u>2.2</u> line

Debtor 1 Victoria Harris-Sanders Debtor 2 (Spows, Iffling) United States Bankruptcy Court for the: WESTERN DISTRICT OF NEW YORK Case number (If known) Debtor 2 (Spows, Iffling) Case number (If known) Official Form 106! Schedule 1: Your Income Be as complete and accurate as passible. If we married people are filling tegether (Debtor 1 and Behtor 2), both are equally responsible for supplying correct information. If you are separated and not filling in you, do not include information about your spouse is not filling with you, do not include information about your spouse. If you are separated and your spouse is not filling with you, do not include information about your spouse in not filling with you, do not include information about your spouse in not filling with you, do not include information about your spouse. If you are separated and your spouse is not filling with you, do not include information about your spouse in rot filling with you, include information about your spouse. If you are separated and your spouse is not filling with you, do not include information about your spouse in not filling with you, do not include information about your spouse in not filling with you, include information about your spouse. If you have made and care are space is needed, attach a separate spage with information. If you have more than one job, attach a separate page with information about additional employers. Debtor 1 Debtor 2 or non-filing spouse include student or homemaker, if it applies. Employer's address Employer Island Hay Isla Lyell Avenue Rochester, NY 14606 How long employed there? 6 years / 2 weeks Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all emp												
Debtor 2	Fill	in this information t	o identify your ca	ise:								
United States Bankruptcy Court for the: WESTERN DISTRICT OF NEW YORK Case number (II Nown) Official Form 106 Schedule I: Your Income Be as complete and accurate as possible. If two married and not filing jointly, and your spouse is living with you, include information about your spouses. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, information. If you have more than one job, attach a separate page with information. If you have more than one job, attach a separate page with information. Occupation may include student or homemaker, if it applies. Employer's address Employer's address Bal Lyell Avenue Rochester, NY 14606 How long employed there? Gyears / 2 weeks Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separates sheet to this form. For Debtor 1 For Debtor 1 For Debtor 2 or non-filing spouse List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 2 \$ 2,637.35 \$ N/A N/A	Deb	otor 1	Victoria Harr	is-Sanders			_					
Case number (It known) Check if this is:							_					
Official Form 106 Schedule I: Your Income Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for sputyling correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question Fart 1:	Uni	ted States Bankrup	tcy Court for the:	WESTERN DISTRICT	OF NEW YORK		_					
Schedule I: Your Income Be as complete and accurate as possible. If two married people are filling together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are separated and your spouse is not filling jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filling with you, include information about your spouse. If you are separated and your spouse is not filling with you, include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (If known). Answer every question Part 1: Debtor 1 Debtor 2 or non-filling spouse Employed Employed Employed Debtor 1 Debtor 2 or non-filling spouse Employed Debtor 3 Debtor 4 Debtor 5 Debtor 6 Debtor 7 Debtor 9 D	(If kn	own)	1061					□ An	amende suppleme	ed filing ent showi		
Be as complete and accurate as possible. If two married people are filling together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filling with you, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filling with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question Part 1:								MN	M / DD/ Y	YYY		
supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question Part 1:									- · ·			12/15
If you have more than one job, attach a separate page with information about additional employers. Occupation Manager Include part-time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. Debtor 1 Debtor 2 or non-filing spouse Include part-time, seasonal, or self-employed work. Employer's name Employer's name Employer's address Isa48 Lyell Avenue Rochester, NY 14606 How long employed there? Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. Estimate monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 2. \$ 2,637.35 \$ N/A 3. Estimate and list monthly overtime pay.	suppos spor attac	plying correct infouse. If you are sep the chase separate sheet	rmation. If you a parated and you get to this form. (are married and not filir r spouse is not filing wi	ng jointly, and your s th you, do not includ	pouse i e infori	is livii matio	ng with y n about y	ou, incl your spo	ude infoi ouse. If n	mation about nore space is	your needed,
attach a separate page with information about additional employers. Not employed Not employ	1.	, ,	oyment		Debtor 1				Debtor 2	or non-	filing spouse	
Include part-time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. Employer's name Employer's address Employer's address 1848 Lyell Avenue Rochester, NY 14606 How long employed there? 6 years / 2 weeks Fart 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 2. \$ 2,637.35 \$ N/A 3. Estimate and list monthly overtime pay. 3. +\$ 0.00 +\$ N/A		attach a separate	page with	Employment status	_					-		
Include part-time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. Employer's address Employer's address 1848 Lyell Avenue Rochester, NY 14606 How long employed there? 6 years / 2 weeks Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 2. \$ 2,637.35 \$ N/A 3. Estimate and list monthly overtime pay. 3. +\$ 0.00 +\$ N/A			additional	Occupation					□ Not c	прюуса		
Occupation may include student or homemaker, if it applies. Employer's address 1848 Lyell Avenue Rochester, NY 14606 How long employed there? 6 years / 2 weeks Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse 2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 2. \$ 2,637.35 \$ N/A 3. Estimate and list monthly overtime pay. 3. +\$ 0.00 +\$ N/A				Employer's name	Janitronics, Inc.	'Highla	ınd					
Rochester, NY 14606 How long employed there? 6 years / 2 weeks Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse 2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 3. Estimate and list monthly overtime pay. 3. +\$ 0.00 +\$ N/A					nospitai (pei							
Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 2. \$ 2,637.35 \$ N/A 3. Estimate and list monthly overtime pay. 3. +\$ 0.00 +\$ N/A		or homemaker, if	it applies.	Employer's address								
Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse 2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 2. \$ 2,637.35 \$ N/A 3. Estimate and list monthly overtime pay. 3. +\$ 0.00 +\$ N/A				How long employed th	nere? <u>6 years</u>	/ 2 \	veek	s	_			
spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse 2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 2. \$ 2,637.35 \$ N/A 3. Estimate and list monthly overtime pay. 3. +\$ 0.00 +\$ N/A	Par	t 2: Give De	tails About Mon	thly Income								
more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 3. Estimate and list monthly overtime pay. 2. \$ 2,637.35 \$ N/A N/A				ate you file this form. If y	ou have nothing to re	port for	any lii	ne, write	\$0 in the	space. Ir	nclude your noi	n-filing
List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 2. \$ 2,637.35 \$ N/A 3. Estimate and list monthly overtime pay. 3. +\$ 0.00 +\$ N/A					mbine the information	for all e	emplo	yers for th	nat perso	on the	lines below. If	you need
2. deductions). If not paid monthly, calculate what the monthly wage would be. 2. \$2,637.35 \$ N/A 3. Estimate and list monthly overtime pay. 3. +\$ 0.00 +\$ N/A								For Debt	tor 1			
	2.					2.	\$_	2,6	637.35	\$	N/A	
4. Calculate gross Income. Add line 2 + line 3. 4. \$\(\) \(3.	Estimate and list	t monthly overti	me pay.		3.	+\$_		0.00	+\$	N/A	
	4.	Calculate gross	Income. Add lin	e 2 + line 3.		4.	\$_	2,63	7.35	\$_	N/A	

				For	Debtor 1		otor 2 or	
	Conv	y line 4 here	4.	\$	2,637.35	non-fili \$	ng spouse N/A	
			٠.	Ψ	2,037.33	Ψ	IVA	-
5.	List	all payroll deductions:						
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	597.04	\$	N/A	_
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$	N/A	_
	5c.	Voluntary contributions for retirement plans	5c.	\$	0.00	\$	N/A	_
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$	N/A	_
	5e.	Insurance	5e.	\$	0.00	\$	N/A	_
	5f.	Domestic support obligations	5f.	\$	0.00	\$	N/A	_
	5g. 5h.	Union dues Other deductions. Specify:	5g. 5h.+	\$	0.00	\$ - \$	N/A N/A	_
_			_	· —	0.00	φ		-
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	597.04	\$	N/A	-
7.	Calc	ulate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	2,040.31	\$	N/A	_
8.	List a	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$	N/A	
	8b.	Interest and dividends	8b.	\$	0.00	\$	N/A	_
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.		* \$	0.00	\$	N/A	-
	8d.	Unemployment compensation	8d.	\$	0.00	\$	N/A	
	8e.	Social Security	8e.	\$	0.00	\$	N/A	_
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	e 8f.	\$	0.00	\$	N/A	_
	8g.	Pension or retirement income	8g.	\$	0.00	\$	N/A	_
	8h.	Other monthly income. Specify: Recently started Per diem @ Highland	8h.+	\$	998.90	- \$	N/A	_
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	998.90	\$	N/A	A
10.	Calc	ulate monthly income. Add line 7 + line 9.	10. \$	3	3,039.21 + \$_	N	I/A = \$	3,039.21
	Add	the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.						
11.	Inclu- other	e all other regular contributions to the expenses that you list in <i>Schedule</i> de contributions from an unmarried partner, members of your household, your r friends or relatives. ot include any amounts already included in lines 2-10 or amounts that are not sifty:	depend	,		d in <i>Sche</i>	edule J. 11. +\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certaines				if it	12. \$	3,039.21
							Combin	
13.	Do y	ou expect an increase or decrease within the year after you file this form No.	?				monthl	y income
		Yes. Explain: Debtor recently started 2nd job at Highland Hosp	oital de	oing e	environmental	service	s	
		, , , , , , , , , , , , , , , , , , , ,						

Fill in	this informa	tion to identify yo	ur case:					
Debto		Victoria Harr		ers		Check	c if this is:	
D-14-	0					_	An amended filing	
Debto (Spou	or 2 use, if filing)						A supplement snow 3 expenses as of t	ring postpetition chapter he following date:
United	United States Bankruptcy Court for the: WESTERN DISTRICT OF NEW YORK				MM / DD / YYYY			
Case	number							
(If kno	own)							
Off	ficial Fo	rm 106J						
		J: Your I	 Exper	nses				12/15
Be as	s complete a	and accurate as	possible eded, atta	. If two married people ar ich another sheet to this				
Part 1		ibe Your House	hold					
	Is this a joir ■ No. Go to							
	_	s Debtor 2 live i	n a separ	ate household?				
	□N	0	·					
	□ Y	es. Debtor 2 mus	t file Offici	al Form 106J-2, Expenses	for Separate House	ehold of Debto	or 2.	
2.	Do you have	e dependents?	□ No					
	Do not list Debtor 2.	ebtor 1 and	Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
ſ	Do not state	the			_			□ No
(dependents	names.			Son		4	Yes
					Son		15	■ No □ Yes
								□ No
								☐ Yes
								□ No
3.	Do your exp	enses include	_					☐ Yes
(expenses of	f people other th	nan $_{m \Box}$	No Yes				
	yourself and	d your depender	nts? □	163				
Part 2		ate Your Ongoir						
expe				uptcy filing date unless y y is filed. If this is a supp				
		s paid for with r		government assistance i				
				cluded it on Schedule I: Y	our Income			
the v		n assistance and	a nave inc				Your expe	enses
the v	alue of such	n assistance and 6I.)					Your expe	enses
the vi (Office	value of such cial Form 10 The rental o	n assistance and 6I.)	hip expen	ses for your residence. In	nclude first mortgage	e 4. \$	Your expe	875.00
the value (Office 4.	value of such cial Form 10 The rental of payments ar	n assistance and 16I.) or home ownersl	hip expen	-	nclude first mortgage	e 4. \$	Your expe	
the value (Office 4.	value of such cial Form 10 The rental of payments ar If not include	n assistance and 6I.) or home ownersind any rent for the	hip expen	-	nclude first mortgage	e 4. \$	Your expe	
the v. (Office	The rental of payments ar If not included 4a. Real of 4b. Prope	or home owners and any rent for the led in line 4: estate taxes rty, homeowner's	hip expen	r lot. 's insurance	nclude first mortgage	4. \$ 4a. \$ 4b. \$	Your expe	0.00 0.00
the v. (Office	The rental of payments ar If not includ 4a. Real e 4b. Prope 4c. Home	or home owners and any rent for the led in line 4: estate taxes rty, homeowner's	hip expen e ground c s, or renter pair, and u	r lot. 's insurance upkeep expenses	nclude first mortgage	4. \$ 4a. \$	Your expe	875.00 0.00

Official Form 106J Schedule J: Your Expenses
Case 2-20-20178-PRW, Doc 1, Filed 02/28/20, Entered 02/28/20 16:40:44,
Description: Main Document, Page 33 of 53

Fill in this	information to identify your	case:						
Debtor 1	Victoria Harris-Sa	Victoria Harris-Sanders						
	First Name	Middle Name	Last Name					
Debtor 2 (Spouse if, filir	ng) First Name	Middle Name	Last Name					
United Sta	ates Bankruptcy Court for the:	WESTERN DISTRICT	OF NEW YORK					
Case numl (if known)	ber				☐ Check if this is an amended filing			
	Form 106Dec	مريان دادي	l Dahtaria Sala	adulaa				
Decia	aration About a	n individua	i Deptor's Sch	eaules	12/15			
	ooth. 18 U.S.C. §§ 152, 1341, 1		, ,	. , ,	0, or imprisonment for up to 20			
Did y	ou pay or agree to pay some	one who is NOT an atto	orney to help you fill out ban	kruptcy forms?				
= 1	No							
□ `	Yes. Name of person				ruptcy Petition Preparer's Notice, and Signature (Official Form 119)			
Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.								
X /s	s/ Victoria Harris-Sanders		X					
	ictoria Harris-Sanders ignature of Debtor 1		Signature of De	ebtor 2				
Da	ate February 27, 2020		Date					

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

Software Copyright (c) 1996-2020 Best Case, LLC - www.bestcase.com

Best Case Bankruptcy

	II in this inform									
		nation to identify you								
De	ebtor 1	Victoria Harris-S	Sanders Middle Name	Last Name	•					
1 -	ebtor 2		ACT III AL							
` '	oouse if, filing)	First Name	Middle Name	Last Name	;					
Ur	nited States Bar	nkruptcy Court for the:	WESTERN DISTRICT C	F NEW YORK						
1	ase number known)						Check if this is an			
							amended filing			
0	fficial Fo	rm 107								
St	atement	of Financial	Affairs for Indivi	duals Fili	ng for Bankrı	ıptcy	4/19			
			ible. If two married people							
		ore space is needed. n). Answer every que	, attach a separate sheet to stion.	this form. On t	ne top of any addition	nai pages, write yo	our name and case			
Pa	rt 1: Give D	etails About Your Ma	arital Status and Where Yo	u Lived Before						
1.	What is you	current marital statu	us?							
	■ Married									
	□ Not mar	ried								
2.	During the la	During the last 3 years, have you lived anywhere other than where you live now?								
	□ No									
	Yes. Lis	t all of the places you	lived in the last 3 years. Do r	not include where	you live now.					
	Debtor 1 Pr	Debtor 1 Prior Address:		Debt	or 2 Prior Address:	Dates Debtor 2 lived there				
	287 Crock Rochester	ett Drive , NY 14623	From-To: 4/1/2018-10/3 18		☐ Same as Debtor 1		☐ Same as Debtor 1 From-To:			
		erton Road , NY 14622	From-To: 6/6/2016-3/31 8	_ •	nme as Debtor 1		☐ Same as Debtor 1 From-To:			
3.			ver live with a spouse or le							
	_		,	,	,	-,	, , , , , , , , , , , , , , , , , , , ,			
	■ No □ Yes. Ma	ke sure vou fill out Sc	hedule H: Your Codebtors (C	Official Form 106	H).					
		•	,		,					
Pa	rt 2 Explai	n the Sources of You	ır Income							
4.	Fill in the tota	I amount of income yo	mployment or from operation received from all jobs and have income that you received.	all businesses, i	ncluding part-time activ	vities.	endar years?			
	□ No									
	_	in the details.								
			Debtor 1		Debtor	. 2				
			Sources of income	Gross incor		es of income	Gross income			
			Check all that apply.	(before dedu exclusions)	ctions and Check	all that apply.	(before deductions and exclusions)			

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page

					Debtor 1					Debtor 2		
					Sources of inco		(bef	oss income fore deduction lusions)	ns and	Sources of inc Check all that a		Gross income (before deductions and exclusions)
			1 of curren iled for ban		■ Wages, combonuses, tips	missions,		\$6,	507.42	☐ Wages, combonuses, tips	nmissions,	
					☐ Operating a b	ousiness				☐ Operating a	business	
			dar year: December 3	31, 2019)	■ Wages, components, tips	missions,		\$54,	499.45	☐ Wages, combonuses, tips	nmissions,	
					☐ Operating a b	ousiness				☐ Operating a	business	
			dar year bef December 3		■ Wages, combonuses, tips	missions,		\$40,	032.00	☐ Wages, combonuses, tips	nmissions,	
					☐ Operating a b	ousiness				☐ Operating a	business	
		each s	•	ne gross inco	e and you have ir me from each sou	·		· ·	•	•		
					Debtor 1					Debtor 2		
					Sources of inco	ome	eac (bef	oss income to the source fore deductions)		Sources of inc Describe below		Gross income (before deductions and exclusions)
Par	t 3:	List	Certain Pay	ments You	Made Before Yo	u Filed for E	Bankrı	uptcy				
6.	Are		Debtor 1's Neither De individual p	or Debtor 2' btor 1 nor D rimarily for a	s debts primarily	consumer arily consu or househol	debts Imer d	s? lebts. Consu			_	I(8) as "incurred by an
			□ No.	Go to line 7		, ,						
			□ Yes	List below e paid that cre not include	ach creditor to wh	ude paymen ttorney for th	its for d nis ban	domestic sup kruptcy case	port obliga e.	ations, such as cl	hild support ar	ne total amount you nd alimony. Also, do
		Yes.			r both have prim re you filed for ba	-			itor a total	of \$600 or more	?	
			□ _{No.}	Go to line 7	-							
			■ Yes	List below e include pay	ach creditor to wh	ic support ob						creditor. Do not nclude payments to an
	Cre	ditor'	s Name and	Address	Date	s of payme	nt	Total an	nount paid	Amount you still owe	Was this p	ayment for

Official Form 107

Case number (if known)

Official Form 107

Debtor 1

Victoria Harris-Sanders

Statement of Financial Affairs for Individuals Filing for Bankruptcy

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?

No

Yes. Fill in the details.

Describe the property you lost and how the loss occurred

Describe any insurance coverage for the loss
Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.

Date of your loss

Value of property lost

Nο

Name of trust

Yes. Fill in the details.

beneficiary? (These are often called asset-protection devices.)

Description and value of the property transferred

Best Case Bankruptcy

Date Transfer was

made

Par	18: List of Certain Financial Accounts, Ir	nstrur	nents, Safe Depos	it Boxes, and Sto	orage Unit	s	
20.	Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No						
	Yes. Fill in the details.						
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)		Last 4 digits of account number Type or instrum		int or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 cash, or other valuables?	year	before you filed fo	or bankruptcy, an	ıy safe dep	oosit box or other deposit	tory for securities,
	■ No □ Yes. Fill in the details.						
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)		Who else had ac Address (Number, State and ZIP Code)		Describe	the contents	Do you still have it?
22.	Have you stored property in a storage unit	or pla	ace other than you	r home within 1	year befor	e you filed for bankruptc	y?
	■ No □ Yes. Fill in the details.						
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)		Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)		Describe	the contents	Do you still have it?
Par	9: Identify Property You Hold or Contro	l for S	Someone Else				
23.	Do you hold or control any property that so for someone.	omeo	ne else owns? Inc	lude any propert	y you borr	rowed from, are storing fo	or, or hold in trust
	■ No □ Yes. Fill in the details.						
	Owner's Name Address (Number, Street, City, State and ZIP Code)		Where is the pro (Number, Street, City, Code)		Describe	the property	Value
Par	t 10: Give Details About Environmental In	forma	ation				
For	he purpose of Part 10, the following definit	ions	apply:				
	Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.						
	Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.						
	Hazardous material means anything an enhazardous material, pollutant, contaminant			as a hazardous	waste, ha	zardous substance, toxic	substance,
Rep	ort all notices, releases, and proceedings th	nat yo	ou know about, reg	ardless of when	they occu	ırred.	
24.	Has any governmental unit notified you that	at you	ı may be liable or p	ootentially liable	under or i	n violation of an environn	nental law?
	■ No □ Yes. Fill in the details.						
	Name of site Address (Number, Street, City, State and ZIP Code)		Governmental un Address (Number,			onmental law, if you it	Date of notice

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 6

Debit	Victoria narris-Sanuers		Case Humber (II known)					
5. F	lave you notified any governmental unit o	f any release of hazardous material?						
• .		. any roleado of mazaradad material.						
	No							
L	Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice				
6. F	lave you been a party in any judicial or ad	ministrative proceeding under any envi	ronmental law? Include settlements	and orders.				
	_							
	■ No □ Yes. Fill in the details.							
_	Case Title	Court or aganay	Nature of the case	Status of the				
	Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	case				
Part	11: Give Details About Your Business or	Connections to Any Business						
		•						
/. V	Within 4 years before you filed for bankrup			ny business?				
	_	in a trade, profession, or other activity,	•					
	☐ A member of a limited liability com	pany (LLC) or limited liability partnershi	ip (LLP)					
	☐ A partner in a partnership							
•	☐ An officer, director, or managing e	xecutive of a corporation						
	☐ An owner of at least 5% of the votil	ng or equity securities of a corporation						
	No None of the above applies. Go to	Part 12						
	No. None of the above applies. Go to Part 12.							
	Yes. Check all that apply above and fill in the details below for each business.							
	Business Name Address	Describe the nature of the business	Employer Identification numb Do not include Social Security					
'	(Number, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Dates business existed					
	Nithin 2 years before you filed for bankrup nstitutions, creditors, or other parties.	otcy, did you give a financial statement t	o anyone about your business? Inc	lude all financial				
	No							
	Yes. Fill in the details below.							
	Name	Date Issued						
	Address (Number, Street, City, State and ZIP Code)							
Part	12: Sign Below							
re tru vith a 8 U.S	e read the answers on this Statement of Fi ue and correct. I understand that making a bankruptcy case can result in fines up to S.C. §§ 152, 1341, 1519, and 3571.	a false statement, concealing property, o	or obtaining money or property by f					
	ictoria Harris-Sanders oria Harris-Sanders	Signature of Debtor 2						
	ature of Debtor 1							
Date	February 27, 2020	Date						
oid va	ou attach additional pages to <i>Your Statem</i>	ent of Financial Affairs for Individuals F	Filing for Bankruptev (Official Form	107)?				
■ No	, -		O :	•				
∃Ye	s							
oid yo	ou pay or agree to pay someone who is no	ot an attorney to help you fill out bankru	ptcy forms?					
No								
	s. Name of Person Attach the Bankr		,	nac- •				
лисіаі	Form 107 States	ment of Financial Affairs for Individuals Filing	тог ванктирксу	page 7				

Software Copyright (c) 1996-2020 Best Case, LLC - www.bestcase.com Case 2-20-20178-PRW, Doc 1, Filed 02/28/20, Entered 02/28/20 16:40:44, Description: Main Document, Page 42 of 53

Fill by the by Comm	and an in the officer and			
	nation to identify your case:			
Debtor 1	Victoria Harris-Sanders First Name Midd	lle Name	Last Name	-
Debtor 2				_
(Spouse if, filing)	First Name Midd	lle Name	Last Name	
United States Bar	nkruptcy Court for the: WESTER	RN DISTRICT OF NEW	YORK	-
Case number				☐ Check if this is an amended filing
If you are an indi ■ creditors have	vidual filing under chapter 7, you claims secured by your propert	ı must fill out this form y, or		pter 7 12/15
You must file this	ver is earlier, unless the court ex	ays after you file your b		te set for the meeting of creditors, to the creditors and lessors you list
If two married pe sign an	ople are filing together in a joint d date the form.	case, both are equally	responsible for supplying corre	ect information. Both debtors must
write yo	and accurate as possible. If more our name and case number (if kn our Creditors Who Have Secured	own).	h a separate sheet to this form.	. On the top of any additional pages,
For any creditorinformation be		hedule D: Creditors Wh	no Have Claims Secured by Prop	perty (Official Form 106D), fill in the
	ditor and the property that is colla	teral What do you secures a d	u intend to do with the property ebt?	that Did you claim the property as exempt on Schedule C?
Creditor's Caname:	anandaigua National Bank		r the property. se property and redeem it.	□ No
Description of	2015 Toyota RAV 4 100,000	■ Retain the	e property and redeem it. e property and enter into a ation Agreement.	■ Yes
property securing debt:	miles Good condition (lien). Kbb private party value as of 2/25/2020.	.com Retain the	e property and [explain]:	
Creditor's C	itizens Bank, N.A.	■ Surrende	r the property.	■ No
name:			e property and redeem it.	☐ Yes
Description of	308 Pemberton Road		e property and enter into a ation Agreement.	103
property securing debt:	Single family residence on	oe	e property and [explain]:	
	acres lot located at 308 Pemberton Road, Town of Irondequoit, New York			

Part 2: List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill

Official Form 108 Statement of Intention for Individuals Filing Under Chapter 7

page 1

Software Copyright (c) 1996-2020 Best Case, LLC - www.bestcase.com

Deb	otor 1 Victor	ria Harris-Sanders	Case number (if known)
			Unexpired leases are leases that are still in effect; the lease period has not yet ended. e if the trustee does not assume it. 11 U.S.C. § 365(p)(2).
Des	scribe your un	nexpired personal property leases	Will the lease be assumed?
Les	sor's name:	Timothy Artessa	□ No
			■ Yes
	scription of leas perty:	Debtor's one-year residen Garfield Street, East Roch	al lease for her 1/2 house located at 406 ster, NY 14445
	er penalty of		my intention about any property of my estate that secures a debt and any personal
X	/s/ Victoria	Harris-Sanders	X
	Victoria Ha Signature of	arris-Sanders Debtor 1	Signature of Debtor 2
	Date Fe	ebruary 27, 2020	Date

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:		Liquidation
\$24	45	filing fee
\$7	75	administrative fee
+ \$1	15	trustee surcharge
\$30	35	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

United States Bankruptcy Court Western District of New York

Disclosure of Compensation paid to me was: Disclosure of Compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows: For legal services, I have agreed to accept	In	re Victoria Harris-Sanders		Case N	lo.	
Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows: For legal services, I have agreed to accept \$ 1,300.00 Balance Due \$ 1,300.00 Balance Due \$ 0.00 The source of the compensation paid to me was: Debtor Other (specify): Nancy Barrett, Debtor's mother The source of compensation to be paid to me is: Debtor Other (specify): I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required; C. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. [Other provisions as needed] Debtor's mother also paid filling fee of \$335.00 on October 7, 2019. By agreement with the debtor(s), the above-disclosed fee does not include the following service: Fee does not include representation in any adversary proceeding, audit, or fee to amend schedules to add creditors not the fault of the attorney. CERTIFICATION 1 certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding. Petruary 27, 2020 Ronald S. Goldman, Esq. Signature of Autorney Ronald S. Goldman, Esq. S			Debtor(s)	Chapte	er 7	
compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows: For legal services, I have agreed to accept Prior to the filing of this statement I have received \$ 1,300.00 Balance Due \$ 0.00 The source of the compensation paid to me was: Debtor Other (specify): Nancy Barrett, Debtor's mother The source of compensation to be paid to me is: Debtor Other (specify): I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm. I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. [Other provisions as needed] Debtor's mother also paid filling fee of \$335.00 on October 7, 2019. By agreement with the debtor(s), the above-disclosed fee does not include the following service: Fee does not include representation in any adversary proceeding, audit, or fee to amend schedules to add creditors not the fault of the attorney. CERTIFICATION 1 Certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding. Petruary 27, 2020 Selection of Altoney Ronald S.		DISCLOSURE OF COMPE	ENSATION OF ATTOR	RNEY FOR	DEBTOR(S)	
Prior to the filing of this statement I have received \$ 1,300.00 Balance Due \$ 0.00 The source of the compensation paid to me was: Debtor Dother (specify): Nancy Barrett, Debtor's mother The source of compensation to be paid to me is: Debtor Other (specify): I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required: c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. [Other provisions as needed] Debtor's mother also paid filing fee of \$335.00 on October 7, 2019. By agreement with the debtor(s), the above-disclosed fee does not include the following service: Fee does not include representation in any adversary proceeding, audit, or fee to amend schedules to add creditors not the fault of the attorney. CERTIFICATION I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding. February 27, 2020 Bate Sel Ronald S. Goldman, Esq. Ronald S. Goldman, Esq. Ronald S. Goldman, Esq. Signature of Attorney Ronald S. Goldman, Esq. Signature of Attorney Ronald S. Goldman, Esq. Signature of Attorney Ronald S. Goldman Tesq. (88) 546-7410 Fax: (688) 546-7451 resgol@yaho.com	1.	compensation paid to me within one year before the fil	ing of the petition in bankruptcy,	or agreed to be p	aid to me, for servic	
Prior to the filing of this statement I have received \$ 1,300.00 Balance Due \$ 0.00 The source of the compensation paid to me was: Debtor Dother (specify): Nancy Barrett, Debtor's mother The source of compensation to be paid to me is: Debtor Other (specify): I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required: c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. [Other provisions as needed] Debtor's mother also paid filing fee of \$335.00 on October 7, 2019. By agreement with the debtor(s), the above-disclosed fee does not include the following service: Fee does not include representation in any adversary proceeding, audit, or fee to amend schedules to add creditors not the fault of the attorney. CERTIFICATION I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding. February 27, 2020 Bate Sel Ronald S. Goldman, Esq. Ronald S. Goldman, Esq. Ronald S. Goldman, Esq. Signature of Attorney Ronald S. Goldman, Esq. Signature of Attorney Ronald S. Goldman, Esq. Signature of Attorney Ronald S. Goldman Tesq. (88) 546-7410 Fax: (688) 546-7451 resgol@yaho.com		For legal services, I have agreed to accept		\$	1,300.00	
Balance Due S 0.00 2. The source of the compensation paid to me was: Debtor Other (specify): Nancy Barrett, Debtor's mother 3. The source of compensation to be paid to me is: Debtor Other (specify): 1. I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. [Other provisions as needed] Debtor's mother also paid filing fee of \$335,00 on October 7, 2019. By agreement with the debtor(s), the above-disclosed fee does not include the following service: Fee does not include representation in any adversary proceeding, audit, or fee to amend schedules to add creditors not the fault of the attorney. CERTIFICATION I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding. Pebruary 27, 2020 Date // Ronald S. Goldman, Esq. Signature of Attorney		Prior to the filing of this statement I have received	l		1,300.00	
Debtor Other (specify): Nancy Barrett, Debtor's mother The source of compensation to be paid to me is: Debtor Other (specify): I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm. I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. [Other provisions as needed] Debtor's mother also paid filling fee of \$335.00 on October 7, 2019. By agreement with the debtor(s), the above-disclosed fee does not include the following service: Fee does not include representation in any adversary proceeding, audit, or fee to amend schedules to add creditors not the fault of the attorney. CERTIFICATION I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding. Pebruary 27, 2020 Date As Ronald S. Goldman, Esq.					0.00	
The source of compensation to be paid to me is: □ Debtor □ Other (specify): □ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm. □ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached. 5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. [Other provisions as needed] Debtor's mother also paid filing fee of \$335.00 on October 7, 2019. By agreement with the debtor(s), the above-disclosed fee does not include the following service: Fee does not include representation in any adversary proceeding, audit, or fee to amend schedules to add creditors not the fault of the attorney. CERTIFICATION I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding. February 27, 2020 Date Isl Ronald S. Goldman, Esq. Signature of Attorney Ronald	2.	The source of the compensation paid to me was:				
■ Debtor □ Other (specify): 4. ■ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm. □ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached. 5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. [Other provisions as needed] Debtor's mother also paid filling fee of \$335.00 on October 7, 2019. 5. By agreement with the debtor(s), the above-disclosed fee does not include the following service: Fee does not include representation in any adversary proceeding, audit, or fee to amend schedules to add creditors not the fault of the attorney. CERTIFICATION I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding. February 27, 2020 Date Isl Ronald S. Goldman, Esq. Signature of Attorney Ronald S. Goldman, Esq. Signature of Ronald S. Goldman, Esq. Signature Signature Signature S		☐ Debtor ☐ Other (specify): Nanc	cy Barrett, Debtor's mother			
I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm. I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. [Other provisions as needed] Debtor's mother also paid filing fee of \$335.00 on October 7, 2019. By agreement with the debtor(s), the above-disclosed fee does not include the following service: Fee does not include representation in any adversary proceeding, audit, or fee to amend schedules to add creditors not the fault of the attorney. CERTIFICATION I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding. Pebruary 27, 2020 Date Isl Ronald S. Goldman, Esq. Signature of Attorney Ronald S. Goldman, Esq. Ronald S. Goldman, Esq. Signature of Attorney Ronald S. Goldman, Esq. Signature of Storey Stor	3.	The source of compensation to be paid to me is:				
□ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached. 5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. [Other provisions as needed] Debtor's mother also paid filling fee of \$335.00 on October 7, 2019. 5. By agreement with the debtor(s), the above-disclosed fee does not include the following service: Fee does not include representation in any adversary proceeding, audit, or fee to amend schedules to add creditors not the fault of the attorney. CERTIFICATION I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding. February 27, 2020 Isl Ronald S. Goldman, Esq.		■ Debtor □ Other (specify):				
copy of the agreement, together with a list of the names of the people sharing in the compensation is attached. 5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. [Other provisions as needed] Debtor's mother also paid filing fee of \$335.00 on October 7, 2019. 6. By agreement with the debtor(s), the above-disclosed fee does not include the following service: Fee does not include representation in any adversary proceeding, audit, or fee to amend schedules to add creditors not the fault of the attorney. CERTIFICATION I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding. February 27, 2020 Date Isl Ronald S. Goldman, Esq.	4.	■ I have not agreed to share the above-disclosed com	npensation with any other person	unless they are m	nembers and associat	es of my law firm.
a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. [Other provisions as needed] Debtor's mother also paid filing fee of \$335.00 on October 7, 2019. 5. By agreement with the debtor(s), the above-disclosed fee does not include the following service: Fee does not include representation in any adversary proceeding, audit, or fee to amend schedules to add creditors not the fault of the attorney. CERTIFICATION I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding. February 27, 2020 Date Isl Ronald S. Goldman, Esq.						my law firm. A
b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. [Other provisions as needed] Debtor's mother also paid filing fee of \$335.00 on October 7, 2019. By agreement with the debtor(s), the above-disclosed fee does not include the following service: Fee does not include representation in any adversary proceeding, audit, or fee to amend schedules to add creditors not the fault of the attorney. CERTIFICATION I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding. February 27, 2020 Date //s/ Ronald S. Goldman, Esq. Ronald S. Goldman, Esq. Signature of Attorney Ronald S. Goldman, Esq. 45 Exchange Street, Suite #532 Rochester, NY 14614 (585) 546-7410 Fax: (585) 546-7451 rosgol@yahoo.com	5.	In return for the above-disclosed fee, I have agreed to	render legal service for all aspect	s of the bankrupt	cy case, including:	
Fee does not include representation in any adversary proceeding, audit, or fee to amend schedules to add creditors not the fault of the attorney. CERTIFICATION I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding. February 27, 2020 Date /s/ Ronald S. Goldman, Esq. Ronald S. Goldman, Esq. Signature of Attorney Ronald S. Goldman, Esq. 45 Exchange Street, Suite #532 Rochester, NY 14614 (585) 546-7410 Fax: (585) 546-7451 rosgol@yahoo.com		b. Preparation and filing of any petition, schedules, stac. Representation of the debtor at the meeting of credid. [Other provisions as needed]	atement of affairs and plan which itors and confirmation hearing, ar	may be required	;	bankruptcy;
I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding. February 27, 2020	б.	Fee does not include representation in			amend schedule	s to add
this bankruptcy proceeding. February 27, 2020 Date /s/ Ronald S. Goldman, Esq. Ronald S. Goldman, Esq. Signature of Attorney Ronald S. Goldman, Esq. 45 Exchange Street, Suite #532 Rochester, NY 14614 (585) 546-7410 Fax: (585) 546-7451 rosgol@yahoo.com			CERTIFICATION			
Ronald S. Goldman, Esq. Signature of Attorney Ronald S. Goldman, Esq. Ronald S. Goldman, Esq. 45 Exchange Street, Suite #532 Rochester, NY 14614 (585) 546-7410 Fax: (585) 546-7451 rosgol@yahoo.com	this		ny agreement or arrangement for	payment to me f	or representation of	the debtor(s) in
Signature of Attorney Ronald S. Goldman, Esq. 45 Exchange Street, Suite #532 Rochester, NY 14614 (585) 546-7410 Fax: (585) 546-7451 rosgol@yahoo.com		February 27, 2020				
Name of law firm	-	Date	Signature of Attorne Ronald S. Goldma 45 Exchange Stre Rochester, NY 14 (585) 546-7410 Frosgol@yahoo.co	y an, Esq. eet, Suite #532 614 ax: (585) 546-7	451	
			Name of law firm			

United States Bankruptcy Court Western District of New York

In re	Victoria Harris-Sanders		Case No.	
		Debtor(s)	Chapter	7
	VERIFI	CATION OF CREDITOR	R MATRIX	
The ab	ove-named Debtor hereby verifies that t	the attached list of creditors is true and	correct to the best	of his/her knowledge.
Date:	February 27, 2020	/s/ Victoria Harris-Sanders Victoria Harris-Sanders Signature of Debtor		

Office of the US Trustee 100 State Street, Room 6090 Rochester, NY 14614

Brad Vanheukelum, M.D. 999 East Ridge Road, Suite #800 Rochester, NY 14621

Canandaigua National Bank 72 South Main Street Canandaigua, NY 14424

Citizens Bank, N.A. 10561 Telegraph Road Glen Allen, VA 23059

Citizens Bank, N.A. P.O. Box 6260 Glen Allen, VA 23058

Credit Protection Association, L.P. 13355 Noel Road, Suite #2100 Dallas, TX 75240

ESL Federal Credit Union 225 Chestnut Street Rochester, NY 14604

Highland Hospital 1000 South Avenue Rochester, NY 14620

Luther J. Sanders, Jr. 308 Pemberton Road Rochester, NY 14622

LVNV Funding, LLC P.O. Box 1269 Greenville, SC 29603

Macy's P.O. Box 8218 Monroe, OH 45050 Midland Credit Management, Inc. 320 East Big Beaver Road, Suite #300 Troy, MI 48083

Park Ridge Hospital 1555 Long Pond Road Rochester, NY 14626

Paul Howe, M.D. 999 East Ridge Road, Suite #800 Rochester, NY 14621

Petta Davidson 125 Orland Road Rochester, NY 14622

RBS Citizens, N.A. 1000 Lafayette Boulevard Bridgeport, CT 06604

Rochester Gas & Electric Corporation 89 East Avenue Rochester, NY 14649

Solomon & Solomon, P.C. 5 Columbia Circle Albany, NY 12203

Strong Memorial Hospital 601 Elmwood Avenue Rochester, NY 14642